Healthy and Well Kids in Iowa (hawk-i) Program

Administered by the Iowa Department of Human Services (DHS)

Notice of Privacy Practices

Effective April 14, 2003

This notice describes how health information about your child may be used and disclosed and how you can get access to this information. Please read it carefully.

This Notice Does Not Change Your Child's Enrollment or Health Care Benefits.

Understanding the Type of Information We Have. The hawk-i Program gets information about your child when you enroll them in the Program. It includes your child's date of birth, sex, ID number and other personal information. We also get payment information and other data about your child's medical care from your child's health plan. Information that can be used to identify your child and relates to their medical care or payment for medical care is called Protected Health Information (PHI) and is protected by state and federal law.

Our Privacy Commitment to You. The hawk-i Program cares about your privacy. The information we collect about you and your child is private. We are required to give you a notice of our privacy practices. Only people who have both the need and the legal right may see your child's information. Unless you give us permission (authorization) in writing, we will only share your child's information for purposes of providing health care services, paying for their care, running the program or when we are required by law to do so.

How the *hawk-i* Program Can Use and Disclose Information Without Your Permission In Writing.

- * Payment for Your Child's Care. The hawk-i Program may use and share information so the care your child gets can be paid for. For example, payment to your child's health plan.
- * Running the hawk-i Program
 (Health Care Operations). The hawk-i Program may need to use and share information to run the Program. For example, we may use information to review the quality of care your child gets.

Some Examples of Other Ways the hawk-i Program May Use or Disclose Your Child's PHI Without Your Permission in Writing.

* To keep you informed. The *hawk-i*Program may use or share your child's
PHI to mail you information about the

hawk-i Program or health plan choices where you live.

- Other Government Programs. The hawk-i Program may use and share your child's PHI for benefits under other government programs. For example, to see if you can get Medicaid benefits.
- Health Review Reasons. The hawk-i Program may use or share your child's PHI with other agencies that review health care services hawk-i gives your child.
- Fraud or Abuse. The hawk-i Program may be required to use and share your PHI if needed for an investigation of fraud and/or abuse.
- ❖ <u>Legal Reasons</u>. The *hawk-i* Program may use and share information when we are required by law to do so. For example, judicial and administrative proceedings, law enforcement or national security purposes, court orders, disaster relief, review of the *hawk-i* Program activities by government agencies, to avoid a serious threat to health or safety or in other kinds of emergencies.

Other Uses and Disclosures May Be Made with Your Permission in Writing.

The *hawk-i* Program may ask for your written permission to use or share your child's personal information in other ways. If you give us your written permission and change your mind or decide to cancel it,

you must let the *hawk-i* Program know in writing. We cannot take back any information used or shared that you have already agreed to.

Your Privacy Rights

You have the following rights regarding the PHI that we have about your child. Your requests must be made in writing to the Iowa Department of Human Services at the address on the next page.

- ❖ See or Get Copies of Your Child's Records. In most cases, you have the right to look at or get copies of your child's records. You may be charged a fee for the cost of copying your records.
- * Make a Change or Update Your Child's Records. You may ask the hawk-i Program to change or update your child's records if you feel that there is a mistake. We can deny your request for certain reasons, but we must give you a written reason for our denial.
- List of Disclosures. You have the right to know whom the *hawk-i*Program has shared your information with after April 14, 2003. This list will not include information shared to provide health care services, payment for your child's care, or running the Program. The list will not include information provided directly to you or your family, or information that was sent with your written permission.

Ask to Limit Use or Disclosure ofInformation by the *hawk-i* Program.

You have the right to ask to limit how your child's information is used or shared. We are not required to agree to your request.

Choose How hawk-i Shares
Information With You. You can ask
that we share information with you in a
certain way or in a certain place. For
example, you may ask us to send
information to your work address
instead of your home address. You do
not have to give us a reason for your
request.

Changes to this Notice

We can change this notice. A change to this notice will be effective for PHI we already have about you as well as any information we may receive in the future. We are required by law to comply with whatever notice is currently in effect. Any changes to our notice will be published on our web site at www.hawk-i.org. If material changes are made to the notice, a new notice will be mailed to you before it takes effect.

How to Use Your Rights Under This Notice

If you want to use your rights under this notice, you have two options:

❖ If You Have a Complaint or Would Like to Write To Us. If you believe that your privacy rights have been violated, you have the right to file a complaint with the Iowa Department of Human Services. You may write to:

DHS Privacy Office Iowa Department of Human Services 1305 E Walnut, 1st Floor Des Moines, Iowa 50319 **Phone: 1-800-803-6591**

• No action will be taken against you if you file a complaint.

Complaints to the Federal

Government. If you believe that your privacy rights have been violated, you have the right to file a complaint with the federal government. You may write to:

Region VII
Office of Civil Rights, U.S.
Dept. of Health and Human Services
601 East 12th Street – Room 248
Kansas City, Missouri 64106
Voice Phone: 1-816-426-7278

FAX: 1-816-426-3686 (TDD: 1-816-426-7065)

 No action will be taken against you if you file a complaint with the federal government.

No person shall be discriminated against because of race, color, national origin, sex, age, mental or physical disability, creed, religion, or political belief when applying for or receiving benefits or services from DHS, or any of its vendors or contractors.

Please Note

The hawk-i Program does not have copies of your child's medical records. If you want to look at, get a copy of, or change your child's medical records, please contact your doctor, provider, or health plan.

Copies of this Notice

You have the right to get another copy of this notice at any time. To get a copy:

Please call the *hawk-i* Program at:

Phone: 1-800-257-8563 (TDD: 1-888-422-2319) Website: www.hawk-i.org

This notice is available in other languages and alternate formats that meet the guidelines for the Americans with Disabilities Act (ADA). Questions? Call 1-800-257-8563 (TDD: 1-888-422-2319)

Esta notificación está disponible en otras lenguas y formatos diferentes que satisfacen las normas del Acta de Americans with Disabilities (ADA). ¿PREQUNTAS? Llame 1-800-257-8563 (TDD: 1-888-422-2319)

This notice is required for compliance with the requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Comm. 208 (4/03)

hawk-i: HEALTHY AND WELL KIDS IN IOWA

healthy and well kids in iowa

Health care coverage to qualified children

Administered by the Iowa Department of Human Services

Information About Your Privacy Rights

Effective April 14, 2003

You do not need to respond to this notice; it is for your information only.